

Message Text

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PAGE 01 LAHORE 00933 051411Z

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ACTION MED-03

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TO SECSTATE WASHDC NIACT IMMEDIATE 0074

INFO AMEMBASSY ISLAMABAD

UNCLAS LAHORE 0933

C O R R E C T E D C O P Y (TEXT)

FOR DG/MED

E.O. 11652: N/A

TAGS: OGEN, PK

SUBJ: REQUEST FOR FACILITATIVE MEDICAL ASSISTANCE (MANZUR QADIR)

1. MR. MANZUR QADIR, EMINENT LAHORE ATTORNEY, FORMER FOREIGN MINISTER OF PAKISTAN AND FORMER CHIEF JUSTICE OF WEST PAKISTAN HIGH COURT, IS SUFFERING POST-OPERATIVE COMPLICATIONS IN COMBINED MILITARY HOSPITAL (CMH) LAHORE. CMH CHIEF SURGEON COL. NAJIB WISHES TO URGENTLY CONSULT AMERICAN PHYSICIANS WHO MAY BE MORE FAMILIAR WITH CASES OF THIS TYPE.

2. SINCE HE IS NOT FAMILIAR WITH US DOCTORS, COL. NAJIB HAS REQUESTED DEPT'S FACILITATIVE ASSISTANCE IN CONTACTING SUCH MEDICAL EXPERTS. HE HAS HEARD THAT CONSULTATIVE FACILITY EXISTS IN BOSTON AREA, BUT DOES NOT KNOW NAME OF INSTITUTION OR ASSOCIATED DOCTORS. (REGIONAL MEDICAL OFFICER MILTON IN ISLAMABAD BELIEVES DUKE UNIVERSITY IN DURHAM, N.C. MAY HAVE SUCH FACILITY.) COL. NAJIB REQUESTS THAT DEPT LOCATE CONSULTATIVE INSTITUTION OR INDIVIDUAL EXPERT AND INFORM HIM VIA CONGEN OF NAME, ADDRESS AND TELEPHONE NUMBER. HE WOULD THEN TELEPHONE DIRECT FOR CONSULTATIONS. TO INSURE CONNECTION, HE REQUESTS THAT AMERICAN EXPERTS SPECIFY TIME HE SHOULD CALL.

3. COL. NAJIB DESCRIBES MR. QADIR'S CONDITION AS FOLLOWS:
QUOTE: PATIENT IS ABOUT 60 YEARS OLD. HE HAS HAD REPEATED
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EPISODES OF THROMBOPHLEBITIS IN LEGS WITH POSSIBLE PULMONARY

EMBOLISM/INFARCTION FOR THE PAST SEVERAL YEARS. HE REMAINED ON ANTICOAGULANTS TILL MID-72. HE HAS HAD HAEMOPTYSIS -- AT TIMES PROFUSE AT INTERVALS OF FEW MONTHS OVER PAST TWO YEARS. ON EACH OCCASION HE REQUIRED TRANSFUSION OF BLOOD. HE STARTED BLEEDING AGAIN ON JUNE 16, 1974, WHICH CONTINUED DESPITE INFUSION OF SEVERAL PINTS OF BLOOD. BRONCHOSCOPY REVEALED FRESH BLEEDING FROM THE LUMEN OF THE LEFT UPPER LOBE BRONCHUS. THORACOTOMY WAS PERFORMED AND LEFT UPPER LOBE WAS RESECTED ON JUNE 20, 1974. A VENESECTION ON THE LEFT LEG HAD TO BE DONE DURING THE OPERATION. HE DEVELOPED THROMBOPHLEBITIS OF THE LEFT LEG DURING THE NEXT 24 HOURS. THE LEG IS STILL SWOLLEN, BUT NO LONGER WARM OR RED AND THE TENDERNESS HAS DECREASED. HE DEVELOPED SUDDEN DYSPNOEA, HIGH TEMPERATURE WITH RIGORS AND EXTEME EXHAUSTION ON FOUR OCCASIONS DURING THE PAST FEW DAYS -- ALWAYS WHEN HE WAS TRYING TO EVACUATE HIS BOWELS ON A BED SIDE COMMUNE. HIS STOOLS HAVE BEEN TARRY IN COLOR EVER SINCE THE OPERATION. HE HAS AN OLD ANAL FISSURE AND AN ENLARGED PROSTATE. HE HAS DISCOMFORT IN THE PELVIC COLON WITH NO CONTROL OVER THE SPHINCTER MUSCLES. HE DEVELOPED URINARY INFECTION AFTER THE OPERATION. FOLEY'S CATHETER HAS BEEN INSERTED SINCE THE TIME OF OPERATION.

IT APPEARS THAT PATIENT IS THROWING REPEATED EMBOLI INTO HIS LUNGS. HIS DYSPNOEA AND EXHAUSTION ARE INCREASING AND HE NOW NEEDS OXYGEN CONTINUOUSLY. HE HAS BEEN DIGITALISED OVER THE PAST 36 HOURS. HE HAS BEEN GIVEN AMPICLOX INJECTIONS AND COTRIMOXAZOLE FOR SEVERAL DAYS, ALONG WITH SUPPORTIVE MEASURES. HIS HEART BECAME IRREGULAR THIS MORNING BUT HAS REVERTED TO NORMAL RHYTHM. THE RATE, HOWEVER, REMAINS AROUND 120 PER MINUTE. ANTICOAGULANTS HAVE BEEN WITHHELD SO FAR.

HISTOPATH EXAMINATION OF THE RESECTED LOBE SHOWS A HAMARTOMA.
END QUOTE.

4. REQUEST RESPONSE BY NIACT IMMEDIATE TELEGRAM.
GRIFFIN

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